



READY FOR NEW CHALLENGES

ANCHORAGE PROJECT ACCESS 2013 ANNUAL REPORT

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OUR MISSION

The mission of Anchorage Project Access is to increase access to health care for low income uninsured members of our community by using a volunteer network of providers working in a coordinated fashion to create a compassionate, respectful, equitable, accountable and efficient program of necessary services for those in need.

OUR GOALS

- I. Improve the health outcomes of the low income uninsured population of Anchorage
- II. Increase the primary care treatment capacity in Anchorage
- III. Increase the ability of physicians and other community partners to volunteer their services effectively and efficiently
- IV. Increase collaboration within the Anchorage health care community to meet the needs of the low income uninsured population amongst us





“EVERY MOUNTAIN TOP IS WITHIN REACH IF YOU JUST KEEP CLIMBING.”

— Barry Finlay, *Kilimanjaro and Beyond*

2013 was a year of organizing, planning, and preparing for Anchorage Project Access (APA). We settled into our new base camp and strategized the best path forward; even as the political terrain shifted around us, we mapped out the steps that would most likely lead to success for APA and our clientele, providers, and community. Like any expedition, this one was going to be tricky. But the goal was always clear, and the mission still needed to be accomplished.

APA's mission – from the beginning – has been to increase access to health care for low income uninsured members of our community. For eight years we have built a network of health care providers and supporters who volunteer their time and expertise to offer medical care at no charge to some of Anchorage's most needy.

A significant change to the landscape came in the form of the Affordable Care Act (ACA). The ACA was signed into law in 2010, and key provisions went into effect in January 2014. Despite the recent changes, the poorest of the poor – approximately 64% of our patient population for report year 2013 – will remain uncovered and in need of services.

And that means we still have a mountain ahead of us – but we're prepared for the long haul. This year, APA streamlined our processes and filled some empty staff positions in order to provide improved services and shorter waits for our clients. The number of providers in our network continues to climb, including some new specialties we'd never been able to offer before. And the value of those services is also up, as our health care providers committed more resources to our program than ever before.

To honor the enormous contributions of our medical care network, Anchorage Project Access introduced the Mt. Huntington Award. Presented to a handful of our most generous health care providers each quarter, the award represents the uphill battle faced by the patient who inspired it and his successful return to health and employment thanks to the extraordinary efforts of his medical providers. This year's recipients are recognized on page 10.

Now – more than ever – we wish to thank our medical providers, hospital support, board members, and the many people and organizations that allow Anchorage Project Access to serve the less fortunate in our community.

I would also like to take this opportunity to congratulate incoming APA board president Bradley Cruz. Brad has served APA both as a general member and as board vice president, and is the perfect choice to guide APA to the next summit.

Paul Peterson, MD
President, APA Board of Directors



Health care remains a universal topic for which there are no easy answers or solutions. As in the past, it continues to be among the most expensive line items in an annual budget, resulting in many people finding themselves without health care benefits. The result remains the same from year to year – the uninsured keep using emergency departments for non-emergent treatment.

Anchorage Project Access (APA) is a local replication of a national model that has proven to improve health outcomes and reduce emergency department charity care costs in many communities. Residing fiscally and administratively under the nonprofit structure of Christian Health Associates, the project was founded and brought to the implementation stage through the collaborative efforts of many community stakeholders.

APA has been coordinating donated health care for the underserved for eight years. People who meet the program criteria are eligible for these donated services and it is offered to them in a dignified and compassionate manner. Staff performs all “back office” duties beginning with financial screening; and – once eligible – the patients’ care is managed until they exit the program. APA patient care coordinators work closely with providers on the clinical leadership team and the APA medical director when medical issues arise.

APA operates on the premise that all patients have a primary care provider; and if they do not, they are assigned one. This process guarantees the patient has a medical home to receive appropriate diagnostic tests and specialty referrals if necessary. We are hopeful this process will result in improved health habits for our patients in the future. As part of the “responsibility agreement,” patients are encouraged to “pay it forward” by volunteering 20 hours in the community in whatever capacity they choose.

Anchorage Project Access has an active board of directors as well as several standing committees that include an executive committee, board development, resource development, clinical leadership team, evaluation, finance, and health care reform.

ELIGIBILITY REQUIREMENTS

- Municipality of Anchorage resident; a limited amount of people from outside the Anchorage bowl are served
- Gross household income of 200% or less of the Federal Poverty Level
- No other form of health insurance including: Medicare, Medicaid, Native, VA, Tri-Care, etc.
- Must have a medical need

Eight years ago, Anchorage Project Access (APA) opened its doors and today it continues to be one of the major safety net organizations in Anchorage for our community's neediest population.

The strength and endurance of APA continues to lie with its 515 volunteer health care providers. During Report Year 2013 (October 1, 2012 – September 30, 2013), the APA staff scheduled over 1,744 appointments on behalf of 574 eligible patients. These appointments represent an increase of over 14% from last year's report.

In 2013 many internal changes were implemented at APA. We've grown and learned valuable lessons over the past eight years. We've instigated new procedures that streamlined our processes and improved the APA experience for our patients. The value of donated care is up considerably from last year. This increase is due in large part to a small number of patients requiring extremely expensive treatments.

The number of new and unique patients served for Report Year 2013 was 274. The sources of our referrals are derived from the following: 52% from the Anchorage Neighborhood Health Center; 16% from Providence Family Medicine Residency; 28% from participating APA specialists; and 4% are "self-referrals."

The demographic characteristics of our clients for the year remained similar to those reported in 2012. Again, she is typically a Caucasian female between 50–59 years of age. As in the past, while many are unemployed, the majority are working multiple part-time jobs without health benefits or are self-employed.

Based on internal health and wellness surveys, APA clients indicated their "poor physical health days" decreased by 45.9%. This internal documentation also indicates patient employment status rose after exiting the project and more people are utilizing the primary care home they were connected with through APA.

Since APA opened its doors eight years ago, the one factor that continues to be a constant is the generosity of our volunteer network. Data documented for this annual report is represented in the value of services donated to APA patients this year – estimated at over \$11 million. As in past years, many services supplied by APA volunteer providers were not submitted for documentation, making the actual amount of donated care much higher than reported.

All of our volunteer providers are extremely generous and APA wouldn't exist without their contributions. However, there are those volunteers who have far exceeded their initial pledges to APA and we recognize them with the Mt. Huntington Award. Quarterly, APA staff and board members present a certificate to the winning provider.

Certificates are signed by the governor, mayor, and commissioner of DHSS. Special ads run in the Anchorage Daily News listing all Mt. Huntington Award recipients.

For Report Year 2013 – October 1, 2012 through September 30, 2013 – 274 new and unique patients were treated by an APA volunteer health care provider. Also, at some point, 574 patients were enrolled and eligible for services during this time period.

Figure 1 illustrates the demographic characteristics of these 274 new and unique Project Access patients. For Report Year 2013, demographics remained similar to those reported last year. Once again, she is a Caucasian, single woman between 50–59 years old. While many of our patients may be unemployed for a variety of reasons, 42% are working full- or part-time or are self-employed without health benefits. Education remains fairly consistent to previous years, with the majority being high school graduates. However, approximately 35% of our patients have attended some college or are college graduates. The homeless population continues to be significant, as it is in the entire Anchorage community, at nearly 35%.

“While I was attending nursing school and living on pennies, the Anchorage Neighborhood Health Center provided me with a primary care physician who referred me to Anchorage Project Access. I had some serious medical needs to be resolved. Deep vein thrombosis and venous reflux caused me chronic pain and swelling in my legs. I frequently awoke gasping for air and, due to sleep apnea, my oxygen levels were functioning at only 77%. As if these difficulties were not enough, I also suffered from overall bad circulation and asthma.

APA services allowed me to persevere through a difficult time, receive the health care services I so desperately needed, and continue on to graduate from nursing school.

I am forever grateful to Anchorage Project Access for giving me the life I have today.”

— APA Patient D.J.

Gender	Count	Percentage
Female	164	59.85%
Male	110	40.15%
	274	100.00%

Age	Count	Percentage
1–19	2	0.73%
20–29	26	9.49%
30–39	37	13.50%
40–49	57	20.80%
50–59	108	39.42%
60–69	41	14.96%
70+	3	1.10%
	274	100.00%

Education Level	Count	Percentage
Less than high school	47	17.15%
High school graduate or GED	132	48.19%
Some college or vocational school	64	23.35%
College graduate	31	11.31%
	274	100.00%

Employment Status	Count	Percentage
Unemployed	160	58.39%
Employed Part Time	53	19.34%
Employed Full Time	42	15.33%
Self-employed	19	6.94%
	274	100.00%

Household Size (Number of People)	Count	Percentage
1	179	65.33%
2	47	17.15%
3	18	6.57%
4	13	4.75%
5	5	1.83%
6	7	2.55%
7	4	1.46%
8	1	0.36%
	274	100.00%

Ethnicity	Count	Percentage
White	168	61.32%
Hispanic/Latino	31	11.31%
Black/African American	28	10.22%
Asian	26	9.49%
Multi-Racial	14	5.11%
Native Hawaiian or Pacific Islander	6	2.19%
American Indian or Alaska Native	1	0.36%
	274	100.00%

Marital Status	Count	Percentage
Single	148	54.02%
Married	57	20.80%
Divorced	46	16.79%
Separated	11	4.01%
Widowed	12	4.38%
	274	100.00%

Housing Status	Count	Percentage
Own	47	17.15%
Rent	120	43.81%
Staying with Family / Non-Family Members	65	23.72%
Community Shelter	5	1.82%
Homeless	27	9.85%
Other	10	3.65%
	274	100.00%

Federal Poverty Level	Count	Percentage
0%–50%	112	40.88%
51%–100%	63	22.99%
101%–150%	61	22.26%
151%–200%	38	13.87%
	274	100.00%

FIGURE 1: Characteristics of New Patients Served by APA.

I. IMPROVE THE HEALTH OUTCOMES OF THE LOW INCOME UNINSURED POPULATION OF ANCHORAGE

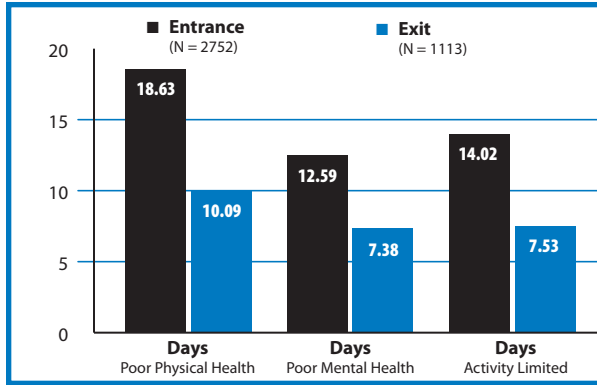


FIGURE 2: Poor Health Days.

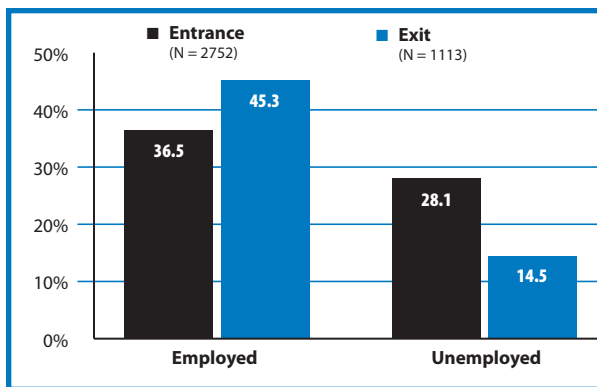


FIGURE 3: Employment Status.

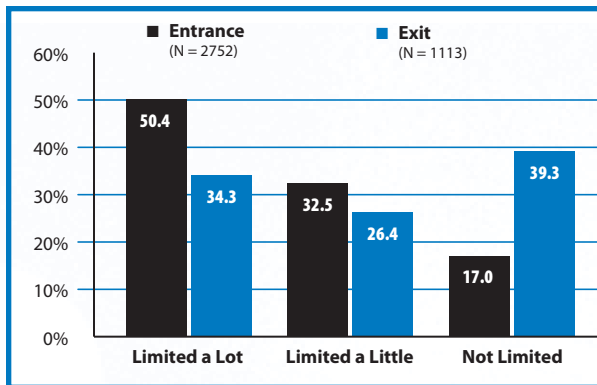


FIGURE 4: Work Limitations.

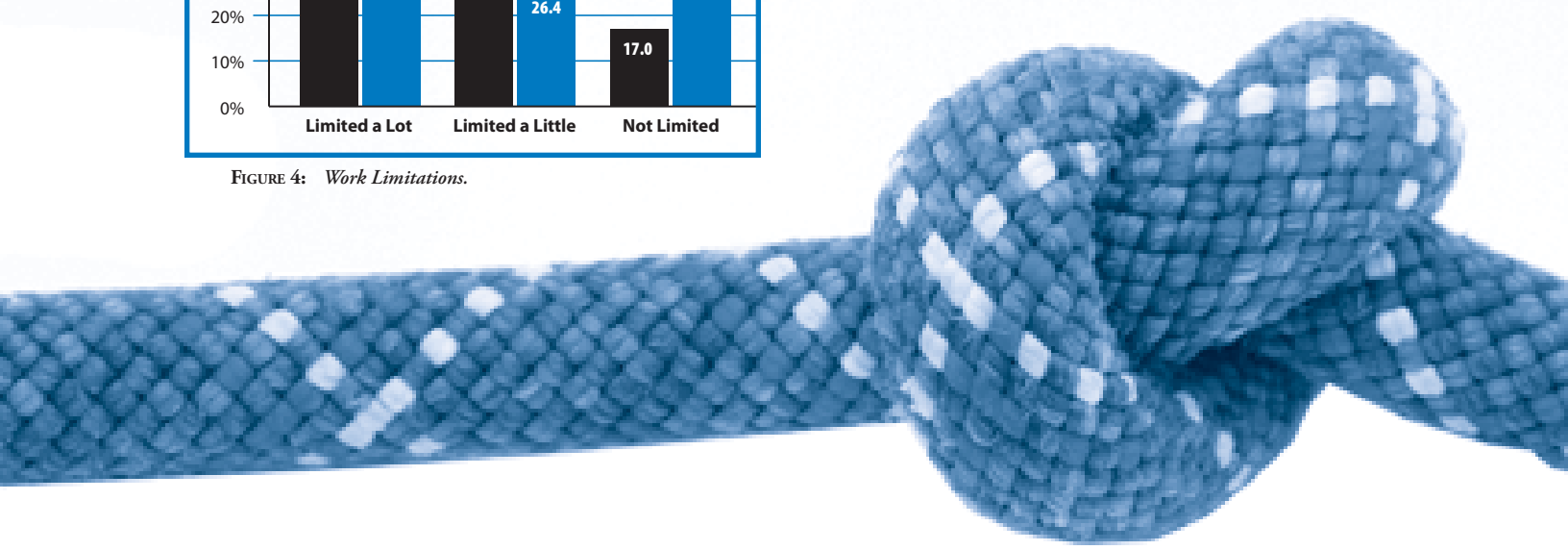
APA patients complete a health and wellness survey when they are enrolled in the program and again six months after their medical need has been met. Survey respondents are asked to rank their health on a scale from 1 (poor) to 5 (excellent).

Figure 2 demonstrates APA patients who completed the program reported marked improvements to both physical and mental health. The number of days reported with “poor physical health” was reduced by 45.9%; “poor mental health” days were reduced by 41.4%, and the number of days they experienced limited activity due to health issues was reduced by 46.3%.

Figure 3 shows the number of patients who were working after they completed the program went up considerably, suggesting that their improved health status made it easier to find and keep employment; 36.5% were employed at entrance versus 45.3% at exit of the program.

We also asked our patients to assess their own work limitations. Figure 4 suggests that the number of APA patients who believed they were “limited a lot” or “limited a little” before entering our program were doing significantly better after their health care needs had been met, and the number of patients who said they had no work limitations more than doubled.

All three graphs indicate a significant improvement in our patients’ overall health and a reduction in their limitations due to health considerations.



II. INCREASE THE PRIMARY CARE TREATMENT CAPACITY IN ANCHORAGE

Once a client is financially eligible for enrollment in the program, APA requires they have a primary care home; and if they do not, they will be assigned one. This process ensures continuity of care and allows our patients to establish an ongoing relationship with their health care provider. As the emergency department has historically been the primary care home for many Project Access patients, establishing a relationship with a provider is a new lifestyle that must be learned. This practice creates good health habits, leading to improved overall health in the future. As shown in Figure 5, the latest APA program exit surveys indicated:

- 75.1% of APA patients had a primary care home vs. 60.6% at entrance to the program.
- 96.4% of APA patients planned to remain with their primary care provider vs. 90.6% at entrance to the program.

Historically, radiology is the specialty that generates the greatest number of appointments. However, that changed for report year 2013, as APA staff scheduled 222 orthopedic surgeries (as shown in Figure 6.) A treatment may include multiple appointments or procedures on behalf of the patient. For example, a patient may begin with a consultation, followed by an X-ray or lab tests, and ending with physical therapy.

During Report Year 2013, APA staff scheduled 1,744 appointments on behalf of 574 eligible patients.

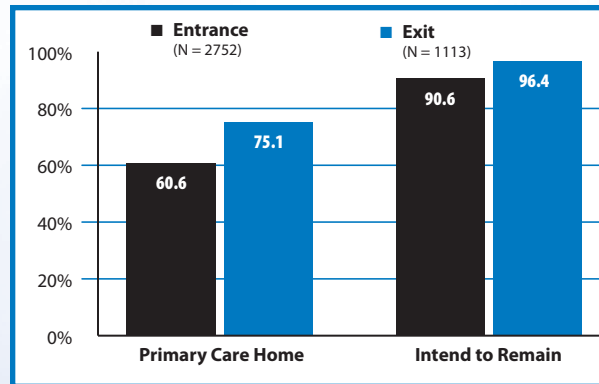


FIGURE 5: Primary Care Home and Intention to Remain.

Specialty	Total Enrollments	Specialty	Total Enrollments
Allergy / Immunology	17	Optometry	1
Ambulatory Surgery	36	Otolaryngology	45
Anesthesiology	134	Pathology	119
Audiology	3	Phlebology	28
Cardiology	87	Physical Medicine / Rehabilitation	7
Dermatology	39	Physical Therapy	142
Durable Med Equip – Slp Disorders	10	Podiatry	29
Endocrinology	26	Pulmonary Disease	6
Family Medicine	28	Radiation Oncology	12
Gastroenterology	109	Radiology	161
Hematology / Oncology	37	Rheumatology	3
Hospital Services	130	Sleep Disorders	15
Hyperbaric Services	1	Support Services	1
Infectious Disease	1	Surgery – Breast	1
Interventional Radiology	1	Surgery – Cardiothoracic	4
Nephrology	14	Surgery – General	38
Neurology	21	Surgery – Orthopedic	222
Neurosurgery	5	Surgery – Plastic / Recon	12
Obstetrics / Gynecology	67	Surgery – Thoracic	1
Occupational Therapy	10	Urology	63
Ophthalmology	58	TOTALS	1744

FIGURE 6: Number of Appointments by Specialty.

Specialty	# of Providers	Specialty	# of Providers
Allergy / Immunology	5	Pediatrics	25
Anesthesiology	15	Phlebotomy	2
Audiology	2	Physical Medicine / Rehabilitation	3
Cardiology	34	Physical Therapy	41
Dermatology	6	Podiatry	6
Endocrinology	5	Pulmonary Disease	3
Family Medicine	23	Radiation Oncology	4
Gastroenterology	13	Radiology	19
Hematology / Oncology	18	Rheumatology	3
Infectious Disease	5	Sleep Disorders	5
Internal Medicine / General	9	Support Services	11
Mental Health Services Limited	2	Surgery – Breast	2
Nephrology	14	Surgery – Cardio	4
Neurology	8	Surgery – General	9
Neurosurgery	1	Surgery – Orthopedic	53
Obstetrics / Gynecology	43	Surgery – Plastic	2
Occupational Therapy	4	Urology	10
Ophthalmology	7		
Optometry	4	Collaborating Providers:	
Otolaryngology	6	AFMR	52
Pain Management	5	ANHC	23
Pathology	8		
Pediatric Ophthalmology	1	TOTAL	515

FIGURE 7: Anchorage Project Access Providers by Specialty.

III. INCREASE THE ABILITY OF PHYSICIANS AND OTHER COMMUNITY PARTNERS TO VOLUNTEER THEIR SERVICES EFFECTIVELY AND EFFICIENTLY

Currently, 515 health care providers participate in the APA volunteer network compared to 493 last year. Figure 7 represents our volunteer network listed by specialty. However, we continue to encounter unmet needs in many areas and are constantly looking to increase provider participation.

If you would like to join the Anchorage Project Access volunteer network, please contact the executive director at (907) 743-6651. Naturally, your level of participation is entirely at your discretion and any assistance you can provide is very much appreciated.

“APA was a ray of sunshine through a dark cloud. I was pleased with every aspect of the program, staff, and doctors. Some people may feel entitled to such services – I came in a humbled man needing help and I’m so grateful.”

– APA Patient R.A.



IV. INCREASE COLLABORATION WITHIN THE ANCHORAGE HEALTH CARE COMMUNITY TO MEET THE NEEDS OF THE LOW INCOME UNINSURED POPULATION AMONGST US

REVOLUTIONS

February 2, 2013 marked Anchorage Project Access' fourth annual fund raising event – *Revolutions: Spinning for Health Care* – at the Anchorage 5th Avenue Mall. It was another huge success as the medical and business communities joined forces to raise over \$62,000 for their neighbors in need. Twenty teams participated for a grand total of 84 riders – a Revolutions record breaker.

PROJECT HOMELESS CONNECT

As a major safety net organization in the Anchorage area, APA prides itself in also being a good steward in the community. APA staff participates in the annual Project Homeless Connect event at the Egan Center. Businesses and social services organizations community-wide participate to assist our homeless neighbors with their most urgent needs – addressing everything from their housing situations to getting a haircut.



ANCHORAGE SCHOOL-BASED HEALTH CENTERS

Anchorage School-Based Health Centers (SBHCs) provide sliding-fee health services on-site at school. Anchorage Project Access ensures children can receive needed prescription medications and specialty care, assists with volunteer recruitment and provider relations, and provides resource development expertise and assistance.

The site at Clark Middle School has offered physicals, limited acute care services, and immunizations since 2010; during 2013, preparations were underway to open a new SBHC site at Begich Middle School in January 2014. A new name – Anchorage School-Based Health Centers – reflects the program's expansion.

Accomplishments during 2013 included:

- 433 visits for physicals, acute care, and immunizations. Only six students did not return to class immediately following their visit, minimizing lost time in the classroom.
- Preparations for the Healthy Spot SBHC at Begich MS allowed it to open on schedule in January 2014.
- Over 80% of Clark students had parent permission to use the Clark SBHC.
- Students and parents continued to have very high satisfaction with the health center.
- 81.8% of patients seen during Fall 2013 either had Medicaid/Denali Kid Care or were uninsured and qualified for a discount on our sliding fee scale (family incomes below 200% of the federal poverty line).

Our appreciation and thanks to:

Our wonderful volunteers

- Health care providers, including the Alaska Family Medicine Residency, especially Robert McAlister, MD; Jon Lyon, MD; Mary Blenkush, MD; and Susan Beesley, MD.
- Outreach and patient support volunteers.
- Our evaluation team at the UAA Department of Health Sciences, especially Gabriel Garcia, PhD.

Our funders and contributors

- Rasmuson Foundation, Providence Health and Services Alaska, First National Bank of Alaska, and contributors Jon Lyon, Marcy Custer, Catherine Mannix, and the Begich PTSA.



Anchorage School-Based Health Centers

“Anchorage Project Access is changing my life in ways that I probably can't even comprehend right now. There were so many times when I would have just given up if they weren't there to support me. My whole world has changed... I've got too much to live for. I'm not ready to die. I want to be there for my grandchildren, and I feel very blessed that Anchorage Project Access could help me do that. Now I have hopes of even getting off disability and returning to work. Just to be a halfway normal person again would be amazing.”

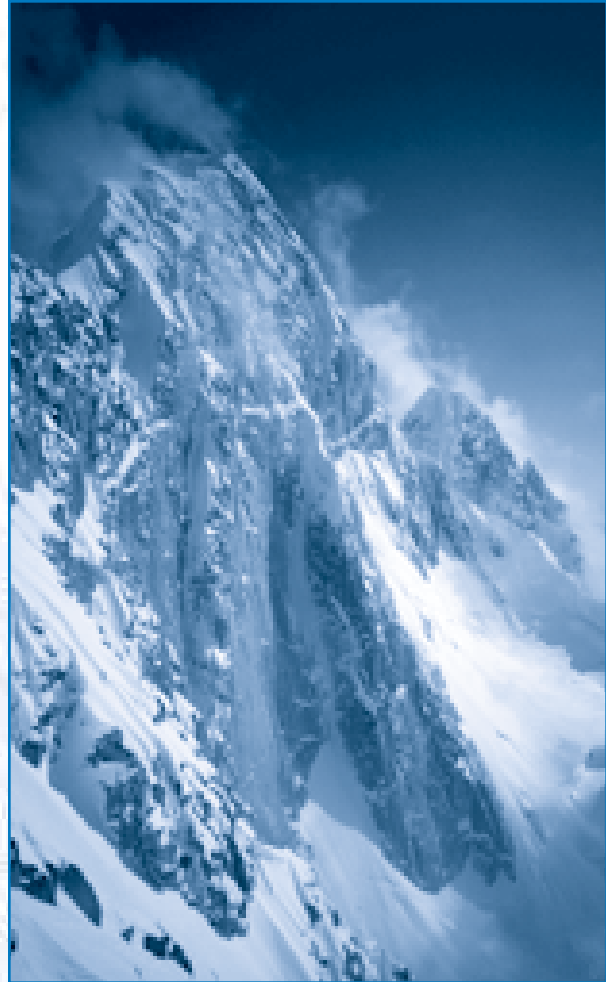
– APA Patient P.B.

A MOUNTAIN OF APPRECIATION

Anchorage Project Access presented the Mt. Huntington Award to five of the program's volunteer health care providers in 2013. The award is given to APA providers in recognition of their steadfast commitment and extraordinarily generous service to our medically uninsured neighbors in Anchorage. The award is acknowledged and signed by Alaska Governor Sean Parnell, Anchorage Mayor Dan Sullivan, and State Department of Health and Social Services Commissioner Bill Streur.

In 2007, Richard Willard – one of the first individuals to receive health care through Anchorage Project Access – presented a large aerial photograph of Mt. Huntington to APA in gratitude for the program. Willard had been unemployed and uninsured, and in need of two hip replacements. After successful surgeries and medical care, all donated by APA's incredible volunteer medical network, Willard recovered his health and reentered the workforce.

Rising 12,240 feet in the Alaska Range about eight miles south-southeast of Mt. McKinley, Mt. Huntington is considered one of the most challenging peaks to climb in the world (while overshadowed in absolute elevation by Mt. McKinley, Mt. Huntington is a steeper peak). The photo inspired the award, which has come to symbolize some patients' steep climb to improved health.



Mt. Huntington in the Alaska Range.

Our award recipients in 2013 included:

- Brian Sweeney, MD
- Joanie Hope, MD
- Pathology Associates
[Steven Jayich, MD and Randy Van Antwerp, MD]
- Roland Gower, MD

APA Value of Donated Care October 2012 – September 2013	
Reported	
Health Care Providers	\$ 1,837,340
Hospitals, Radiology, Pathology, etc.	9,575,339*
TOTAL DONATED CARE	\$ 11,412,679*

**Does not include 3rd quarter data for Alaska Regional Hospital.*

FIGURE 8: APA 2013 Value of Donated Care.

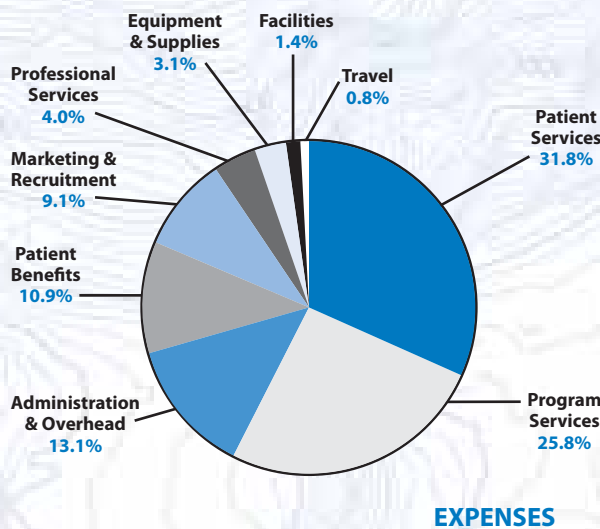
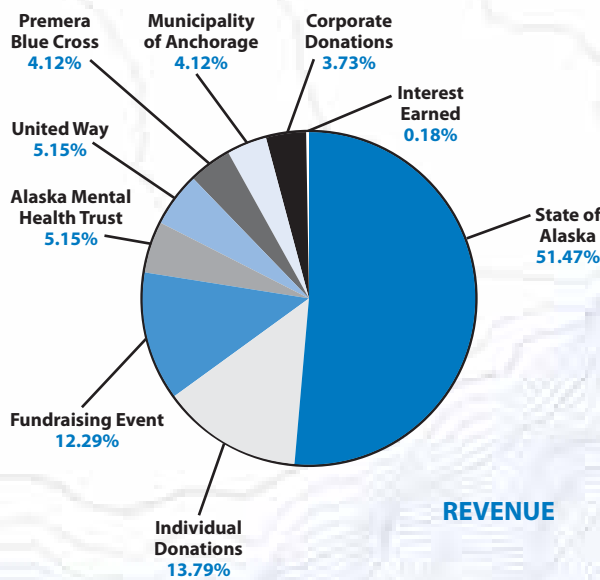


FIGURE 9: APA 2013 Revenue & Expenses.

VALUE OF DONATED CARE

Data for this report is derived from various billing sources for the period October 1, 2012 – September 30, 2013.

The value of donated care is derived through the “billing forms” submitted by APA providers to Meritain Health for documentation.

Data for Report Year 2013 is based on actual data from Meritain Health and from the hospitals. As in past years, many services provided by APA providers were not submitted to Meritain Health for documentation; therefore, the actual amount of donated care could be a great deal higher than reported.

NOTE: The decrease in net assets (noted in Figure 10) during the report year was covered by donations/grants committed and counted as revenue in previous years, including generous support from Providence Health and Services Alaska of \$100,000 per year.

“I participate in Project Access because I feel it is a program designed to identify a segment of the Anchorage population that needs medical assistance but falls through the cracks of federal and/or state public assistance programs. These individuals are generally industrious and attempting to support themselves and their families. They are uninsured, and because of their productivity, make too much to qualify for medical assistance programs, but do not have sufficient funds to pay for a surgical procedure. I get gratification in helping someone in that situation.

I think the staff of APA exert significant effort trying to identify patients who are not only financially deserving, but are good citizens in the community who are making an effort to support themselves and contribute to society. The staff represents a large segment of the Anchorage medical community – not only physicians, but hospitals, surgery centers, imaging facilities, etc., that are donating their time and resources. This requires a lot of organization and coordination, and I feel the APA organization does an excellent job.”

– Dr. Roland Gower

OVERALL VALUE OF PROGRAM

As in past reports, it is important to emphasize that Project Access financials do not demonstrate additional cost savings that might include: reduced emergency room visits; hospital admissions; increased worker productivity; and decreased morbidity and mortality, resulting in lower health costs.

Numerous intangible benefits are also not reflected, such as our patients’ improved quality of life. Additionally, because we offer a more organized and dignified method of delivering donated health care, APA patients and providers experience greater satisfaction in the overall system.

As in past years, APA continues to work in an extremely efficient manner. During Report Year 2013, the ratio of donated care to program costs was 23:1 – for every dollar spent to operate the project, \$23 was donated in medical care. This number increased significantly during Report Year 2013 due to a small number of patients receiving extremely expensive oncology treatments.

Since the onset of Anchorage Project Access eight years ago, the total value of donated care is an extraordinary \$11,412,679. It goes without saying: the medical community in Anchorage is extremely generous.

“Because I didn’t live in Anchorage, I had a strong feeling another door would be slammed in my face like the many doors I had been knocking on for the past four years. I was wrong. APA accepted me. Due to the kindness of doctors and other heroes with Anchorage Project Access, I am now working on getting my life in order again. I wish I could give you more than these words, as you deserve so much more. Thank you Anchorage Project Access for what you have done for me and what you are doing for others. Thank you for giving me my life back.”

— APA Patient A.S.

APA Annual Report Financial Summary
October 2012 – September 2013

Revenue	
State of Alaska	250,000
Individual Donations	66,992
Fundraising Event	59,701
Alaska Mental Health Trust	25,000
United Way	25,000
Premera Blue Cross	20,000
Municipality of Anchorage	20,000
Corporate Donations	18,125
Interest Earned	903
TOTAL REVENUE	\$ 485,721
Expenses	
Personnel	
Patient Services	\$ 156,508
Program Services	126,804
Total Personnel	\$ 283,312
Administration & Overhead	64,656
Patient Benefits	53,853
Marketing & Recruitment	44,898
Professional Services	19,520
Equipment & Supplies	15,144
Facilities	6,898
Travel	3,900
TOTAL EXPENSES	\$ 492,181
Change in net assets	[\$ 6,460]

FIGURE 10: APA 2013 Financial Summary.

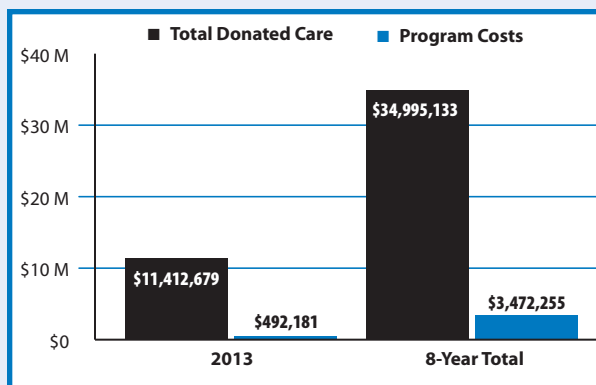


FIGURE 11: Comparison of Donated Care to Program Costs.

Mt. Huntington Circle
(\$50,000+)

Providence Health & Services Alaska
State of Alaska DHSS

Leadership Circle
(\$10,000–\$49,999)

Alaska Mental Health Trust
Municipality of Anchorage
ORCA Orthopaedic Research Clinic of Alaska
Premera Blue Cross Blue Shield of Alaska
United Way of Anchorage

Major Benefactors
(\$5,000–\$9,999)

Alaska Emergency Medicine Associates
The Carr Foundation
Dr. Paul Peterson

Partner in Health
(\$2,500–\$4,999)

Alaska Regional Hospital
Alaska State Employees Share Campaign
First Choice Health
First National Bank Alaska
Gottstein Family Foundation
Mat-Su Health Foundation
Jane & John Hall, MD
Law Office of Marc June
Pick.Click.Give
Dr. Griff Steiner & LB Gregory
The Wilson Agency

Champion for Access
(\$1,500–\$2,499)

Alaska Urology
Anonymous
ConocoPhillips Alaska
Herman & Spring Ellemberger, MDs
Don Gomes & Annie Holt
Lorrie & Morris Horning, MD
KC Kaltenborn & Cathie Schumacher, MDs
Key Bank Foundation
Joanna & Steven Menaker, MD
Alicia Nelson
UBS Matching Gift Program

Friend of Medicine
(\$500–\$1,499)

Alaska Foot & Ankle Specialists
Alaska Institute of Surgical & Medical Specialties
Alaska USA Federal Credit Union
Alyeska Pipeline Service Company
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